



- MUST USE MOST **CURRENT** FORM
- **PRINT** CLEARLY IN BLACK INK
- MAKE SURE ENTIRE CIRCLE IS **FILLED**

EXAMPLE:

Yes ☒ No ☐

Application for Authorization of Ignition Interlock Vendor

PAYMENT INFORMATION

NOTE: Application will not be processed without the required \$450.00 fee. Please include payment and proof of liability insurance with this application.

Type of Application: ☐ Original ☐ Annual Inspection ☐ Renewal

↑ THE ABOVE SPACE IS RESERVED FOR OFFICE USE ONLY ↓

PART I. VENDOR'S SERVICE CENTER INFORMATION

Service Center Name(as it appears on business license):		Service Center Number (As reflected on certificate if applicable):	
Service Center Physical Address (No PO Box):			
City:	State (2- Letter Code):	ZIP:	County:
Local Phone Number:		Toll-Free Phone Number:	
Service Center Email Address		Web Address (if applicable):	
Service Center Mailing Address (if different from physical address):			
City:		State (2- Letter Code):	ZIP:
Printed First Name of Business Manager:		Printed Last Name of Business Manager:	
Business Manager Social Security Number:		Business Manager Date of Birth:	
Business Manager Phone Number:		Business Manager Email:	
Printed First Name of Business Owner:		Printed Last Name of Business Owner:	
Business Owner Social Security Number:		Business Owner Date of Birth:	Business Ownership percentage:
Business Owner Phone Number:		Business Owner Email:	

PART II. MANUFACTURERS' DEVICES SERVICED (SELECT ALL THAT APPLY)

- ☐ A & A Product Company - FIT228 LC and/or FIT229-LC and/or AT230
- ☐ Alcohol Analytics Systems – AAS 2.0
- ☐ Alcohol Countermeasures Systems – Alcolock WR2 and/or Alcolock LR and/or Alcolock WR3
- ☐ Alcohol Detection Systems - DM 904 and/or DM 909
- ☐ America's Alcohol Testing Inc. – Freedom 5 Interlock
- ☐ B.E.S.T. Labs Inc. - FR 9000
- ☐ Blow And Drive Interlock – BDI-747
- ☐ Clean Start Systems - CSS APIID 700
- ☐ Dräger US Interlock LLC – 920 and/or Interlock XT and/or Interlock 7000
- ☐ Guardian – 3060 and/or AMS 2000
- ☐ Guardian Interlock – AMS 2500
- ☐ Instant Interlock – Bracaudit Lock-I
- ☐ Intoxalock – 1001A
- ☐ Lifesafer – FC100 and/or L250
- ☐ Low Cost Interlock – LCI 750 and/or TAB 720 and/or LCI-777
- ☐ Monitech Ignition Interlock Systems – QT-1L
- ☐ Simple Interlock – Co-Pilot
- ☐ Skyfine – AT588
- ☐ Smart Start Inc. – SSI1000 and/or SSI 20/20 and/or SSI 20/30 and/or SSI-2035 and/or FLEX 3030
- ☐ Other (SPECIFY MANUFACTURE AND DEVICE): _____

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III. SERVICES PROVIDED (SELECT ALL THAT APPLY)

<input type="radio"/> Device Installation	<input type="radio"/> Fixed Location <input type="radio"/> Mobile	If offering mobile services, provide the number of mobile units_____
<input type="radio"/> Device Monitoring	<input type="radio"/> Fixed Location <input type="radio"/> Mobile	If offering mobile services, provide the number of mobile units_____
<input type="radio"/> Device Maintenance	<input type="radio"/> Fixed Location <input type="radio"/> Mobile	If offering mobile services, provide the number of mobile units_____
<input type="radio"/> Device Removal	<input type="radio"/> Fixed Location <input type="radio"/> Mobile	If offering mobile services, provide the number of mobile units_____

PART IV. AGREEMENT AND AFFIRMATION

I verify the information provided is true and correct, and I understand any required fee is non-refundable. I also understand this is an official government record and any missing information and/or false statement made on this document or any other supplement provided to DPS may result in criminal prosecution. Signature of the applicant or authorized individual further grants the director or his designee, the right to enter and to inspect the premises or any records required to be kept by Texas Law and Department rule. Furthermore, I understand I must install, sell, service, and or monitor Ignition Interlock Devices approved by the Texas Department of Public Safety and adhere to manufacture's specifications. (required)

I certify that all information I provided in relation to this criminal history record check is true and accurate. I authorize the Texas Department of Public Safety (DPS) to access Texas and Federal criminal history record information that pertains to me and disseminate that information to the designated agency with which I am or am seeking to be employed or to serve as a volunteer, through the DPS Fingerprint-based Applicant Clearinghouse of Texas and as authorized by Texas Government Code Chapter 411 and any other applicable state or federal statute or policy, including 28 U.S.C. 534 and 34 U.S.C. 41101. I authorize the Texas Department of Public Safety to submit my fingerprints and other application information to the FBI for the purpose of comparing the submitted information to available records in order to identify other information that may be pertinent to the application. I authorize the FBI to disclose potentially pertinent information to the DPS during the processing of this application and for as long hereafter as may be relevant to the activity for which this application is being submitted. I understand that the FBI may also retain my fingerprints and other applicant information in the FBI's permanent collection of fingerprints and related information, where all such data will be subject to comparisons against other submissions received by the FBI and to further disseminations by the FBI as may be authorized under the Privacy Act of 1974 (5 USC 552a). I understand my fingerprints will be searched by and against civil, criminal and latent fingerprints in the Next Generation Identification (NGI) system. I understand I am entitled to obtain a copy of any criminal history record check and challenge the accuracy and completeness of the information before a final determination is made by the relevant agency. I also understand the agency may deny me access to children, the elderly, or individuals with disabilities until the criminal history record check is completed. If a need arises to challenge the FBI record response, you may contact the agency that submitted the information to the FBI, or you may send a written challenge request to the FBI's Criminal Justice Information Services (CJIS) Division at FBI CJIS Division, Attention: Correspondence Group, 1000 Custer Hollow Road, Clarksburg, WV 26306. (required)

Manager Signature_____ Date_____

Owner Signature (if different from Manager)_____ Date_____

This form and attachments can be forwarded by mail to:

**Texas Department of Public Safety
Ignition Interlock Device
PO Box 15999
Austin, TX 78761-5999**

Privacy Policy Sec. 559.003. RIGHT TO NOTICE ABOUT CERTAIN INFORMATION LAWS AND PRACTICES (a) Each state governmental body that collects information about an individual by means of a form that the individual completes and files with the governmental body in a paper format or in an electronic format on an Internet site shall prominently state, on the paper form and prominently post on the Internet site in connection with the electronic form, that: (1) with few exceptions, the individual is entitled on request to be informed about the information that the state governmental body collects about the individual; (2) under Sections 552.021 and 552.023 of the Government Code, the individual is entitled to receive and review the information; and (3) under Section 559.004 of the Government Code, the individual is entitled to have the state governmental body correct information about the individual that is incorrect. (b) Each state governmental body that collects information about an individual by means of an Internet site or that collects information about the computer network location or identity of a user of the Internet site shall prominently post on the Internet site what information is being collected through the site about the individual or about the computer network location or identity of a user of the site, including what information is being collected